

Application Data Sheet

**Application Information**

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD AND APPARATUS FOR THERMOFORMING HOLLOW BODIES OF THERMOPLASTIC MATERIAL
Attorney Docket Number::	2511-1057
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	7
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: MAURIZIO  
Middle Name::  
Family Name:: CASTIGLIONI  
Name Suffix::  
City of Residence:: BUSTO ARSIZIO (VA)  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing VIA E. FILIPPINI 12  
Address::  
City of Mailing Address:: BUSTO ARSIZIO (VA)  
State or Province of Mailing Address::  
Country of Mailing Address:: ITALY  
Postal or Zip Code of Mailing Address:: I-20151

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: MAURIZIO  
Middle Name::  
Family Name:: CRIVELLI  
Name Suffix::  
City of Residence:: POGLIANO MILANESE (MI)  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing VIA L. CHIESA 3  
Address::  
City of Mailing Address:: POGLIANO MILANESE (MI)

State or Province of Mailing Address::  
Country of Mailing Address:: ITALY  
Postal or Zip Code of Mailing Address:: I-20010

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: LUCIANO  
Middle Name::  
Family Name:: D'ADDA  
Name Suffix::  
City of Residence:: POGLIANO MILANESE (MI)  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing VIA EUROPA 36  
Address::  
City of Mailing Address:: POGLIANO MILANESE (MI)  
State or Province of Mailing Address::  
Country of Mailing Address:: ITALY  
Postal or Zip Code of Mailing Address:: I-20010

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: DAVIDE  
Middle Name::  
Family Name:: MARIANI  
Name Suffix::  
City of Residence:: SARONNO (VA)  
State or Province of  
Residence::  
Country of Residence:: ITALY  
Street of Mailing VIA C. MIOLA 47

Address::

City of Mailing Address:: SARONNO (VA)

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-21047

### Correspondence Information

Correspondence Customer 00466

Number::

### Representative Information

Representative Customer	00466
Number::	

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/006605	6/18/04

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI2003 A 001520	7/24/03	Yes

**Assignment Information**

Assignee Name:: TECNOS S.P.A.  
Street of Mailing VIA DELLA MERLATA  
Address::  
City of Mailing Address:: NERVIANO (MI)  
State or Province of Mailing Address::  
Country of Mailing Address:: ITALY  
Postal or Zip Code of Mailing Address:: I-20014